

L11000080435

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

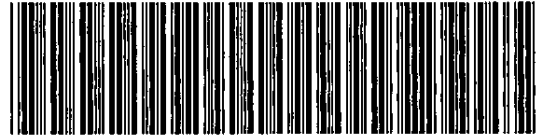
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only



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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE  
DEC 29 2016



December 22, 2016

Florida Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Re: **Flood Advantage Partners LLC**  
**Change of Registered Agent Application**

To Whom It May Concern:

Enclosed please find a **Change of Registered Agent Application** for our client, **Flood Advantage Partners LLC**. Once the application has been processed, please forward evidence of approval to the mailing address on the application. If there is any issue, or if you require any further information, please do not hesitate to contact us.

Thank you,

LicenseLogix  
140 Grand Street, Suite 300  
White Plains, NY 10601  
Service@licenselogix.com  
(800) 292-0909

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TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** FLOOD ADVANTAGE PARTNERS LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Benjamin Rose

Name of Person

RSC Insurance Brokerage, Inc.

Firm/Company

420 Lexington Avenue, Suite 2700

Address

New York, NY 10170

City/State and Zip Code

brose@risk-strategies.com

E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

Benjamin Rose

212 297-1487  
at ( )

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

FLOOD ADVANTAGE PARTNERS LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 07/13/2011 and assigned  
Florida document number L11000080435.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

N/A

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

N/A

**(Principal office address MUST BE A STREET ADDRESS)**

Enter new mailing address, if applicable:

N/A

**(Mailing address MAY BE A POST OFFICE BOX)**

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2011 DEC 27 P 1:13  
STATE SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Corporate Creations Network

New Registered Office Address:

11380 Prosperity Farms Road #221E

Enter Florida street address

Palm Beach Gardens

, Florida 33410

City

Zip Code

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

  
\_\_\_\_\_  
If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
	Robert A Briggs	3250 N 29TH AVE	<input type="checkbox"/> Add
		HOLLYWOOD, FL 33020	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
	Janet Bordonaro	3250 N 29TH AVE	<input type="checkbox"/> Add
		HOLLYWOOD, FL 33020	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
	Advanced E & S of Florida, Inc.	3250 N 29TH AVE	<input type="checkbox"/> Add
		HOLLYWOOD, FL 33020	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
	Charlotte L. Floyd	3250 N 29TH AVE	<input type="checkbox"/> Add
		HOLLYWOOD, FL 33020	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
	Harvey Sheldon	3250 N 29TH AVE	<input type="checkbox"/> Add
		HOLLYWOOD, FL 33020	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
Mgr	RSC Insurance Brokerage, Inc.	160 Federal Street	<input checked="" type="checkbox"/> Add
		2nd Floor	<input type="checkbox"/> Remove
		Boston, MA 02110	<input type="checkbox"/> Change

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 TALLAHASSEE, FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

N/A

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TALLAHASSEE, FLORIDA

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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated December 1, 2016

*Michael Christian*

Signature of a member or authorized representative of a member

Michael Christian

Typed or printed name of signee